	Case 24-	-03472-5-DMW	Doc 13	=iled 11/0	3/24	Enter	ed 11/0	3/24 17:	23:07	7 Pa	ge 1 of 60
Fill	in this inform	ation to identify your	case:								
Deb	otor 1	Alona Chervina K	Čevs								
		First Name	Middle Name		Last N	lame					
1	otor 2 ouse if, filing)	First Name	Middle Name		Last N	Name					
Uni	ted States Ban	kruptcy Court for the:	EASTERN DIST	TRICT OF NO	RTH CA	AROLINA					
Cas	se number 24	4-03472-5-DMW									
(if kn	nown)									_	ck if this is an nded filing
Of	ficial For	m 106Sum									
Su	mmary of	Your Assets a	and Liabiliti	es and C	ertai	n Stati	stical l	nformat	ion		12/15
info	rmation. Fill o	nd accurate as possib ut all of your schedule s, you must fill out a	es first; then com	plete the info	ormatio	n on this f	form. If you				
Par	t 1: Summa	rize Your Assets									
											assets of what you own
1.	Schedule A/I 1a. Copy line	<b>B: Property</b> (Official Fo	orm 106A/B) om Schedule A/B							\$	225,950.00
	1b. Copy line	62, Total personal prop	perty, from Schedu	ule A/B						\$	27,922.71
	1c. Copy line	63, Total of all property	on Schedule A/B	5						\$	253,872.71
Par	t 2: Summa	rize Your Liabilities									
											liabilities nt you owe
2.		Creditors Who Have Cl total you listed in Colur					age of Part	1 of Schedu	le D	\$	256,500.98
3.		: Creditors Who Have total claims from Part					dule E/F			\$	6,000.00
	3b. Copy the	total claims from Part	2 (nonpriority unse	ecured claims)	from lin	ne 6j of <i>Sch</i>	hedule E/F.			\$	21,832.29
							Yo	our total liab	oilities	\$	284,333.27
Par	t 3: Summa	rize Your Income and	Expenses						L		
4.		our Income (Official Fo		Schedule I						\$	8,510.82
5.		our Expenses (Official onthly expenses from li		le J						\$	8,510.60

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

Part 4: Answer These Questions for Administrative and Statistical Records

- No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- Yes
- 7. What kind of debt do you have?
  - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
  - Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

#### Case 24-03472-5-DMW Doc 13 Filed 11/03/24 Entered 11/03/24 17:23:07 Page 2 of 60

Debtor 1 Alona Chervina Keys

Case number (if known) 24-03472-5-DMW

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$\_\_\_\_\_11,778.39

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	1
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

#### Case 24-03472-5-DMW Doc 13 Filed 11/03/24 Entered 11/03/24 17:23:07 Page 3 of 60

			_
Fill in this information to identify your case a	nd this filing:		
Debtor 1 Alona Chervina Keys First Name	Middle Name Last Name	<del></del>	
Debtor 2 (Spouse, if filing) First Name	Middle Name Last Name		
United States Bankruptcy Court for the: EAST	ERN DISTRICT OF NORTH CAROLINA		
Case number <b>24-03472-5-DMW</b>			☐ Check if this is an amended filing
O(() : 1 E			
Official Form 106A/B			
Schedule A/B: Property	/		12/15
□ No. Go to Part 2.  ■ Yes. Where is the property?			
1.1 5148 Holly Ridge Farm Rd	What is the property? Check all that apply		
Street address, if available, or other description	Single-family home  Duplex or multi-unit building  Condominium or cooperative	Do not deduct secured cla the amount of any secure Creditors Who Have Clair	d claims on Schedule D:
	☐ Manufactured or mobile home	Current value of the	Comment value of the
Raleigh NC 27616-000	DO Land	entire property?	Current value of the portion you own?
City State ZIP Code	☐ Investment property ☐ Timeshare	\$451,900.00	\$225,950.00
	Other	Describe the nature of y (such as fee simple, ten	our ownership interest ancy by the entireties, or
	Who has an interest in the property? Check one	a life estate), if known.	tinat.
Wake	☐ Debtor 1 only ☐ Debtor 2 only	Tenancy by the En	шец
County	Debtor 1 and Debtor 2 only		
	At least one of the debtors and another	Check if this is come (see instructions)	munity property
	Other information you wish to add about this iten property identification number:	ı, such as local	
	Valued at Zillow value		
	- 3.300 3		
	vn for all of your entries from Part 1, including any that number here		\$225,950.00
pages you have allaoned to. I all it it it.			

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Cars, vans, trucks, tractors, sport utility vehicles, motorcycles  □ No ■ Yes		
□ No ■ Yes		
■ Yes		
Chrysler		
	Do not doduct coour	ed claims or exemptions. Put
S.1 Make. City Stell who has an interest in the property? Check one	the amount of any se	ecured claims on Schedule D:
	Creditors Who Have	Claims Secured by Property.
	Current value of the entire property?	Current value of the portion you own?
Other information:	entire property:	portion you own:
1/2 interest in vehicle jointly		
owned with spouse. Vehicle	\$18,163.0	9,081.50
valued at JD Power average (see instructions)		
retail of \$18,163.00. Location: 5148 Holly Ridge		
Farm Rd, Raleigh NC 27616		
		ed claims or exemptions. Put
- The first of the		ecured claims on Schedule D: Claims Secured by Property.
Voor 2009	Current value of the	
= Dobtol 2 only	entire property?	portion you own?
Other information:		
Valued at FMV (inherited but not	\$1,000.0	90 \$1,000.00
titled in Debtor's name yet); Location: 5148 Holly Ridge	φ1,000.0	φ1,000.00
Farm Rd, Raleigh NC 27616		
	sories	
■ No □ Yes	550165	
□Yes	tries for	\$10,081.50
Yes  Add the dollar value of the portion you own for all of your entries from Part 2, including any engages you have attached for Part 2. Write that number here	tries for	\$10,081.50
Yes  Add the dollar value of the portion you own for all of your entries from Part 2, including any engages you have attached for Part 2. Write that number here	tries for	\$10,081.50
Add the dollar value of the portion you own for all of your entries from Part 2, including any entries you have attached for Part 2. Write that number here	tries for	
Add the dollar value of the portion you own for all of your entries from Part 2, including any entripages you have attached for Part 2. Write that number here	tries for	Current value of the portion you own? Do not deduct secured
Add the dollar value of the portion you own for all of your entries from Part 2, including any entripages you have attached for Part 2. Write that number here	tries for	Current value of the portion you own? Do not deduct secured
Add the dollar value of the portion you own for all of your entries from Part 2, including any entripages you have attached for Part 2. Write that number here	tries for	Current value of the portion you own? Do not deduct secured
Add the dollar value of the portion you own for all of your entries from Part 2, including any entripages you have attached for Part 2. Write that number here	tries for	Current value of the portion you own? Do not deduct secured
Add the dollar value of the portion you own for all of your entries from Part 2, including any entries you have attached for Part 2. Write that number here	tries for => Bed, Full	Current value of the portion you own? Do not deduct secured
Add the dollar value of the portion you own for all of your entries from Part 2, including any entropages you have attached for Part 2. Write that number here	tries for => Bed, Full n	Current value of the portion you own? Do not deduct secured
Add the dollar value of the portion you own for all of your entries from Part 2, including any entropages you have attached for Part 2. Write that number here	tries for => Bed, Full n	Current value of the portion you own? Do not deduct secured

Official Form 106A/B Schedule A/B: Property page 2

□ No

Debtor 1	Alona Cher	vina Keys	Case number (if known)	24-03472-5-DMW
■ Yes.	Describe			
		1/2 interest in jointly owned (with spouse): Electronics: 42 Inch Tv, 50 Inch Tv, 1 Xbox Console, 5 Computer Scr Nintendo Switch, 1 Oculus Headwear, 4 Iphones, 2 App 6 Ipad Tablets (valued at FMV); Location: 5148 Holly Ridge Farm Rd, Raleigh NC 27616	reens, 1 lle Watches,	\$1,500.00
		d figurines; paintings, prints, or other artwork; books, pictures, or other ions, memorabilia, collectibles	art objects; stamp, coin.	, or baseball card collections;
	Describe			
Examp	musical insti	ographic, exercise, and other hobby equipment; bicycles, pool tables,	golf clubs, skis; canoes	and kayaks; carpentry tools;
	Describe			
10. <b>Firear</b> Exam		s, shotguns, ammunition, and related equipment		
■ No □ Yes.	Describe			
□ No		lothes, furs, leather coats, designer wear, shoes, accessories		
		Clothing and shoes (valued at FMV); Location: 5148 Holly Ridge Farm Rd, Raleigh NC 27616		\$750.00
□ No		ewelry, costume jewelry, engagement rings, wedding rings, heirloom je	ewelry, watches, gems, ς	gold, silver
		Jewelry: Engagement Ring, Wedding Rings, Diamond N	lecklace	
		(valued at FMV); Location: 5148 Holly Ridge Farm Rd, Raleigh NC 27616		\$1,000.00
Exam □ No	arm animals  ples: Dogs, cats,  Describe	birds, horses		
		Dog;		\$0.00
		Location: 5148 Holly Ridge Farm Rd, Raleigh NC 27616		
■ No	ther personal ar	nd household items you did not already list, including any health formation	aids you did not list	
		of all of your entries from Part 3, including any entries for pages number here	you have attached	\$5,250.00

Part 4: Describe Your Financial Assets

De	ebtor 1	Alona Chervina Ke	ys		Case number (if known)	24-03472-5-DMW
Do	you ow	vn or have any legal or	equitable interest i	n any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	■ No	oles: Money you have in y	•	nome, in a safe deposit box, and on hand w	/hen you file your petition	on
				counts; certificates of deposit; shares in cre ts with the same institution, list each.	edit unions, brokerage h	nouses, and other similar
				Institution name:		
		17.1.	Checking	1/2 interest in jointly owned Wells Fargo. Balance = \$1,0		\$517.00
		17.2.	Checking	SECU		\$48.58
		17.3.	Savings	1/2 interest in jointly owned Wells Fargo. Balance = \$6,0		\$3,000.14
		17.4.	Savings	SECU		\$25.49
		17.5.	Savings	Custodial account for minor \$526.00	child - balance	\$0.00
		17.6.	Savings	Custodial account for minor \$526.00	child - balance	\$0.00
		17.7.	Savings	Custodial account for minor \$526.00	child - balance	\$0.00
18.		, mutual funds, or publi oles: Bond funds, investm		rokerage firms, money market accounts		
	■ No □ Yes		Institution or issue	r name:		
		ublicly traded stock and enture	l interests in incor	porated and unincorporated businesses	, including an interes	t in an LLC, partnership, and
		Give specific information	n about them ame of entity:		% of ownership:	
20.	Negoti	iable instruments include	personal checks, ca	potiable and non-negotiable instruments ashiers' checks, promissory notes, and mor ransfer to someone by signing or delivering	ney orders.	
	☐ Yes.	Give specific information Iss	about them suer name:			
		ment or pension accour oles: Interests in IRA, ER		403(b), thrift savings accounts, or other pe	ension or profit-sharing	plans
	Yes.	List each account separa	ately. of account:	Institution name:		

Official Form 106A/B Schedule A/B: Property page 4

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Debtor 1	Alona Chervina Keys	Case r	number (if known) 24-03472-5-DMW
	Roth IRA	Wealthfront	\$9,000.00
Your		e so that you may continue service or use from a cent, public utilities (electric, gas, water), telecommu	
		Institution name or individual:	
23. <b>Annui</b>	ties (A contract for a periodic payment of mo	oney to you, either for life or for a number of years	s)
■ No	Issuer name and description	1.	
24. <b>Interes</b> 26 U.S		a qualified ABLE program, or under a qualified	state tuition program.
■ No □ Yes	Institution name and descrip	otion. Separately file the records of any interests.11	1 U.S.C. § 521(c):
■ No	s, equitable or future interests in property  Give specific information about them	y (other than anything listed in line 1), and right	ts or powers exercisable for your benefit
Exam ■ No	ts, copyrights, trademarks, trade secrets, ples: Internet domain names, websites, productive specific information about them	, and other intellectual property ceeds from royalties and licensing agreements	
Exam ■ No	ses, franchises, and other general intang ples: Building permits, exclusive licenses, co	ibles coperative association holdings, liquor licenses, pr	rofessional licenses
Money or	property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	funds owed to you  Give specific information about them, include	ding whether you already filed the returns and the	tax years
■ No	• • •	al support, child support, maintenance, divorce set	ttlement, property settlement
Exam	benefits; unpaid loans you made to so	yments, disability benefits, sick pay, vacation pay, omeone else	workers' compensation, Social Security
31. <b>Intere</b>	Give specific information  sts in insurance policies  ples: Health, disability, or life insurance; hea	alth savings account (HSA); credit, homeowner's, o	or renter's insurance
□ No ■ Yes	Name the insurance company of each police Company name:	cy and list its value. Beneficiary:	Surrender or refund value:

Official Form 106A/B Schedule A/B: Property page 5

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Debtor 1	Alona Chervina Keys	Case number (if known)	24-03472-5-DMW	
	Term life insurance through Northwestern Mutual	Beneficiary = Spouse	\$0.00	
	Homeowners insurance through Nationwide		\$0.00	
	Vehicle insurance through Geico		\$0.00	
	Pet insurance		\$0.00	
	Health insurance through spouse's employer		\$0.00	
If you a some o	erest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance pone has died.  Give specific information	olicy, or are currently entitled to rece	vive property because	
Exam <sub>p</sub> ■ No	against third parties, whether or not you have filed a lawsuit or made ples: Accidents, employment disputes, insurance claims, or rights to sue Describe each claim	a demand for payment		
■ No	contingent and unliquidated claims of every nature, including countered  Describe each claim	claims of the debtor and rights to	set off claims	
■ No	ancial assets you did not already list  Give specific information			
	he dollar value of all of your entries from Part 4, including any entries irt 4. Write that number here		\$12,591.21	
Part 5: De	scribe Any Business-Related Property You Own or Have an Interest In. List any	real estate in Part 1.		
No. Go	to Part 6. to to line 38.			
	scribe Any Farm- and Commercial Fishing-Related Property You Own or Have an ou own or have an interest in farmland, list it in Part 1.	n Interest In.		
■ No.	own or have any legal or equitable interest in any farm- or commercial Go to Part 7.  Go to line 47.	al fishing-related property?		

Official Form 106A/B Schedule A/B: Property page 6

Describe All Property You Own or Have an Interest in That You Did Not List Above

Part 7:

Debte	Alona Chervina Keys		Case number (if known)	24-03472-5-DMW
	o you have other property of any kind you did not already list? Examples: Season tickets, country club membership			
	No			
	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write that	number here		\$0.00
Part 8	List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$225,950.00
56.	Part 2: Total vehicles, line 5	\$10,081.50		
57.	Part 3: Total personal and household items, line 15	\$5,250.00		
58.	Part 4: Total financial assets, line 36	\$12,591.21		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$27,922.71	Copy personal property to	otal <b>\$27,922.71</b>
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$253.872.71

Official Form 106A/B Schedule A/B: Property page 7

### Case 24-03472-5-DMW Doc 13 Filed 11/03/24 Entered 11/03/24 17:23:07 Page 10 of 60

Fill in this information to identify your case:						
Debtor 1	Alona Chervina K	Ceys				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		EASTERN DISTRICT O	F NORTH CAROLINA			
Case number	24-03472-5-DMW					
(if known)					☐ Check if this is an	
					amended filing	

#### Official Form 106C

#### Schedule C: The Property You Claim as Exempt

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exemp
--------------------------------------------------

1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.								
	■ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)					
	☐ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)							
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.								
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own			Specific laws that allow exemption				
	constant 772 that note this property	Copy the value from Schedule A/B	Che	eck only one box for each exemption.					
	5148 Holly Ridge Farm Rd Raleigh,	\$225,950.00		\$208,253.29	11 USC § 522(b)(3)(B)				
	NC 27616 Wake County Valued at Zillow value Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit					
	5148 Holly Ridge Farm Rd Raleigh, NC 27616 Wake County	\$225,950.00		\$0.00	N.C. Gen. Stat. § 1C-1601(a)(1)				
	Valued at Zillow value Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit					
	2018 Chrysler Pacifica 98,000 miles 1/2 interest in vehicle jointly owned	\$9,081.50		\$2,654.37	N.C. Gen. Stat. § 1C-1601(a)(3)				
	with spouse. Vehicle valued at JD Power average retail of \$18,163.00. Location: 5148 Holly Ridge Farm Rd, Raleigh NC 27616 Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit					
	2008 Ford Focus 170,000 miles	\$1,000.00		\$965.86	N.C. Gen. Stat. § 1C-1601(a)(2)				
	Valued at FMV (inherited but not titled in Debtor's name yet); Location: 5148 Holly Ridge Farm Rd, Raleigh NC 27616 Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit					

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ebtor 1 Alona Chervina Keys			Case number (if known)	24-03472-5-DMW
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the	exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one	e box for each exemption.	
1/2 interest in jointly owned (with spouse): Couch, King Size Bed,	\$2,000.00	<b>=</b>	\$2,000.00	N.C. Gen. Stat. § 1C-1601(a)(4
Refrigerator, Kitchen Table, Microwave, Dining Room Table, 2 Full Size Bed, Small Kitchen Appliances, 3 Computer Desks, 1 Twin Bed, 1 Small Couch, 1 Dining Table, Small House Furniture (val Line from Schedule A/B: 6.1			fair market value, up to licable statutory limit	
1/2 interest in jointly owned (with spouse): Electronics: 65 Inch Tv; 42	\$1,500.00	•	\$1,500.00	N.C. Gen. Stat. § 1C-1601(a)(4
Inch Tv, 50 Inch Tv, 1 Xbox Console, 5 Computer Screens, 1 Nintendo Switch, 1 Oculus Headwear, 4 Iphones, 2 Apple Watches, 6 Ipad Tablets (valued at FMV); Location: 5148 Holly Ridge Line from Schedule A/B: 7.1			fair market value, up to licable statutory limit	
Clothing and shoes (valued at FMV); Location: 5148 Holly Ridge Farm Rd,	\$750.00	<b>=</b>	\$750.00	N.C. Gen. Stat. § 1C-1601(a)(4)
Raleigh NC 27616 Line from Schedule A/B: 11.1			fair market value, up to licable statutory limit	
Jewelry: Engagement Ring, Wedding Rings, Diamond Necklace (valued at	\$1,000.00		\$500.00	N.C. Const. Art. X § 1
FMV); Location: 5148 Holly Ridge Farm Rd, Raleigh NC 27616 Line from Schedule A/B: 12.1			fair market value, up to licable statutory limit	
Jewelry: Engagement Ring, Wedding	\$1,000.00	•	\$500.00	N.C. Gen. Stat. § 1C-1601(a)(4
Rings, Diamond Necklace (valued at FMV); Location: 5148 Holly Ridge Farm Rd, Raleigh NC 27616 Line from Schedule A/B: 12.1			fair market value, up to licable statutory limit	
Checking: 1/2 interest in jointly owned (with spouse): Wells Fargo.	\$517.00	<b>.</b>	\$517.00	N.C. Gen. Stat. § 1C-1601(a)(2
Balance = \$1,034.00. Line from <i>Schedule A/B</i> : 17.1			fair market value, up to licable statutory limit	
Savings: 1/2 interest in jointly owned (with spouse): Wells Fargo. Balance	\$3,000.14	<b>.</b>	\$3,000.14	N.C. Gen. Stat. § 1C-1601(a)(2
= \$6,000.27. Line from <i>Schedule A/B</i> : 17.3			fair market value, up to licable statutory limit	
Roth IRA: Wealthfront Line from Schedule A/B: 21.1	\$9,000.00	<b>I</b>	\$9,000.00	N.C. Gen. Stat. § 1C-1601(a)(9
LINE HUITI SUNGULIE PVD. Z 1.1			fair market value, up to licable statutory limit	

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De	btor 1	Alona Chervina Keys	Case number (if known)	24-03472-5-DMW	
3.	•	you claiming a homestead exemption of more than \$189,050? lect to adjustment on 4/01/25 and every 3 years after that for cases filed on	or after the date of adjustment.)		
		No			
		Yes. Did you acquire the property covered by the exemption within 1,215 days	ays before you filed this case?		
		□ No			
		□ Yes			

### Case 24-03472-5-DMW Doc 13 Filed 11/03/24 Entered 11/03/24 17:23:07 Page 13 of

Rev. 5/2022

### UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NORTH CAROLINA

IN THE MATTER OF: Alona Chervina Keys Debtor(s).

CASE NUMBER: **24-03472-5-DMW** 

0.00

#### SCHEDULE C-1 - PROPERTY CLAIMED AS EXEMPT

- I, Alona Chervina Keys , claim the following property as exempt pursuant to 11 U.S.C. § 522 and the laws of the State of North Carolina, and nonbankruptcy Federal law: (Attach additional sheets if necessary).
- 1. NCGS 1C-1601(a)(1) (NC Const., Article X, Section 2) REAL OR PERSONAL PROPERTY USED AS A RESIDENCE OR BURIAL PLOT (The exemption is not to exceed \$35,000; however, an unmarried debtor who is 65 years of age or older is entitled to retain an aggregate interest in the property not to exceed \$60,000 in value so long as the property was previously owned by the debtor as a tenant by the entireties or as a joint tenant with rights of survivorship and the former co-owner of the property is deceased, in which case the debtor must specify his/her age and the name of the former co-owner, if a child use initials only, of the property below).

Description of Property and Address	Market <u>Value</u>	Mortgage Holder or Lien Holder	Amount of Mortgage or Lien	Net <u>Value</u>	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(1)
5148 Holly Ridge Farm Rd Raleigh, NC 27616 Wake County Valued at Zillow value	451,900.00	Shellpoint Mortgage Servicing Stoneridge Owners Assoc., Inc.	238,146.71 5,500.00	104,126.65 50% owned	0.00

Debtor's Age:	
Name of former co-owner:	

#### 1111

VALUE OF REAL ESTATE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(1): \$

2. NCGS 1C-1601(a)(3) MOTOR VEHICLE (The exemption in one vehicle is not to exceed \$3,500).

Model, Year Style of Auto	Market <u>Value</u>	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	<u>Lien Holder</u>	Amount of <u>Lien</u>	Net <u>Value</u>	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(3)
2018 Chrysler Pacifica 98,000 miles 1/2 interest in vehicle jointly owned with spouse. Vehicle valued at JD Power average retail of \$18,163.00. Location: 5148 Holly Ridge Farm Rd, Raleigh NC 27616	18,163.00		State Employees Credit Union	12,854.27	2,654.37 50% owned	2,654.37

#### VALUE OF MOTOR VEHICLE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(3): \$ 2,654.37

3. NCGS 1C-1601(a)(4) (NC Const., Article X, Section 1) PERSONAL OR HOUSEHOLD GOODS (The debtor's aggregate interest is not to exceed \$5,000 plus \$1,000 for each dependent of the debtor, not to exceed \$4,000 total for dependents). The number of dependents for exemption purposes is 3.

		Owner (D1)Debtor 1				Claimed as Exempt
Description	Market	(D2)Debtor 2	Lien	Amount	Net	Pursuant to NCGS
of Property	<u>Value</u>	(J)Joint	<u>Holder</u>	of Lien	<u>Value</u>	1C-1601(a)(4)

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		-	1	1		
		Owner				Claimed as Exempt
Description	Market	(D1)Debtor 1 (D2)Debtor 2	Lien	Amount	Net	Pursuant to NCGS
of Property	Value	(J)Joint	Holder	of Lien	Value	1C-1601(a)(4)
		(3)30111				<u> </u>
1/2 interest in jointly						
owned (with						
spouse): Couch,						
King Size Bed,						
Refrigerator,						
Kitchen Table,						
Microwave, Dining						
Room Table, 2 Full						
Size Bed, Small						
Kitchen Appliances,						
3 Computer Desks,						
1 Twin Bed, 1 Small						
Couch, 1 Dining						
Table, Small House					2,000.00	
Furniture (val	4,000.00				50% owned	2,000.00
1/2 interest in jointly	•					,
owned (with						
spouse):						
Electronics: 65 Inch						
Tv; 42 Inch Tv, 50						
Inch Tv, 1 Xbox						
Console, 5						
Computer Screens,						
1 Nintendo Switch, 1						
Oculus Headwear, 4						
Iphones, 2 Apple						
Watches, 6 Ipad						
Tablets (valued at						
FMV);					4 500 00	
Location: 5148 Holly	2 222 22				1,500.00	4 500 00
Ridge	3,000.00				50% owned	1,500.00
Clothing and shoes						
(valued at FMV);						
Location: 5148 Holly						
Ridge Farm Rd,	_					
Raleigh NC 27616	750.00				750.00	750.00
Jewelry:						
Engagement Ring,						
Wedding Rings,						
Diamond Necklace						
(valued at FMV);						
Location: 5148 Holly						
Ridge Farm Rd,						
Raleigh NC 27616	1,000.00				1,000.00	500.00
I taioigii ito £1010	,	I	1	1	,	

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(4): \$ 4,750.00

4. NCGS 1C-1601(a)(5) TOOLS OF TRADE (The debtor's aggregate interest is not to exceed \$2,000 in value).

Description	Market <u>Value</u>	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	Lien <u>Holder</u>	Amount of <u>Lien</u>	Net <u>Value</u>	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(5)
-NONE-						

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(5): \$ 0.00

5. NCGS 1C-1601(a)(6) LIFE INSURANCE (NC Const., Article X, Section 5).

	Cash
Description\Insured\Last Four Digits of Policy Number\Beneficiary(if child, initials only)	Value

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Description\Insured\Last Four Digits of Policy Number\Beneficiary(if child, initials only)	Cash Value
-NONE-	

6. NCGS 1C-1601(a)(7) PROFESSIONALLY PRESCRIBED HEALTH AIDS (For Debtor or Debtor's Dependents, no limit on value).

Description
-NONE-

7. NCGS 1C-1601(a)(8) COMPENSATION FOR PERSONAL INJURY, INCLUDING COMPENSATION FROM PRIVATE DISABILITY POLICIES OR ANNUITIES, OR COMPENSATION FOR DEATH OF A PERSON UPON WHOM THE DEBTOR WAS DEPENDENT FOR SUPPORT. COMPENSATION NOT EXEMPT FROM RELATED LEGAL, HEALTH OR FUNERAL EXPENSE.

Description AND Source of Compensation, Including Name (If child, initials only) & Last Four Digits of Account Number of any Disability Policy/Annuity -NONE-

8. NCGS 1C-1601(a)(2) ANY PROPERTY (Debtor's aggregate interest in any property is not to exceed \$5,000 in value of any unused exemption amount to which the debtor is entitled under NCGS 1C-1601(a)(1)).

		Owner				
Description of Property	Market	(D1)Debtor 1 (D2)Debtor 2	Lien	Amount	Net	Value Claimed as Exempt
and Address	Value	(J)Joint	Holder	of Lien	<u>Value</u>	
2008 Ford Focus	1,000.00				1,000.00	965.86
170,000 miles						
Valued at FMV						
(inherited but not						
titled in Debtor's name yet);						
Location: 5148						
Holly Ridge Farm						
Rd, Raleigh NC						
27616						
Checking: 1/2	1,034.00				517.00	517.00
interest in jointly					50% owned	
owned (with						
spouse): Wells Fargo. Balance =						
\$1,034.00.						
Savings: 1/2	6,000.27				3,000.14	3,000.14
interest in jointly					50% owned	
owned (with						
spouse): Wells						
Fargo. Balance =						
\$6,000.27.						

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(2): \$ 4,483.00

9. NCGS 1C-1601(a)(9) and 11 U.S.C. § 522 INDIVIDUAL RETIREMENT PLANS & RETIREMENT FUNDS, as defined in the Internal Revenue Code, and any plan treated in the same manner as an individual retirement plan, including individual retirement accounts and Roth retirement accounts as described in §§ 408(a) and 408A of the Internal Revenue Code, individual retirement annuities as described in § 408(b) of the Internal Revenue Code, accounts established as part of a trust described in § 408(c) of the Internal Revenue Code, and funds in an account exempt from taxation under § 401, 403, 408, 408A, 414, 457, or 510(a) of the Internal Revenue Code. For purposes of this subdivision, "Internal Revenue Code" means Code as defined in G.S. 105-228.90.

Type of Account\Location of Account\Last Four Digits of Account Number

**Roth IRA: Wealthfront** 

10. NCGS 1C-1601(a)(10) FUNDS IN A COLLEGE SAVINGS PLAN, as qualified under § 529 of the Internal Revenue Code, and that are not otherwise excluded from the estate pursuant to 11 U.S.C. §§ 541(b)(5)-(6), (e), not to exceed a cumulative limit of \$25,000. If funds were placed in a college savings plan within the 12 months prior to filing, the contributions must have been made in the ordinary course of the debtor's financial affairs and must have been consistent with the debtor's past pattern of contributions. The exemption applies to funds for a child of the debtor that will actually be used for the child's college or university expenses.

College Savings Plan\Last Four Digits of Account Number\Value\Initials of Child Beneficiary

-NONE-

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11. NCGS 1C-1601(a)(11) RETIREMENT BENEFITS UNDER THE RETIREMENT PLANS OF OTHER STATES AND GOVERNMENTAL UNITS OF OTHER STATES (The debtor's interest is exempt only to the extent that these benefits are exempt under the laws of the state or governmental unit under which the benefit plan is established).

Name of Retirement Plan\State Governmental Unit\Last Four Digits of Identifying Number

-NONE-

12. NCGS 1C-1601(a)(12) ALIMONY, SUPPORT, SEPARATE MAINTENANCE, AND CHILD SUPPORT PAYMENTS OR FUNDS THAT HAVE BEEN RECEIVED OR TO WHICH THE DEBTOR IS ENTITLED (The debtor's interest is exempt to the extent the payments or funds are reasonably necessary for the support of the debtor or any dependent of the debtor).

Type of Support\Amount\Location of Funds
-NONE-

13. TENANCY BY THE ENTIRETY. The following property is claimed as exempt pursuant to 11 U.S.C. § 522 and the law of the State of North Carolina pertaining to property held as tenants by the entirety.

Description of	Market	Lien	Amount of Lien	Net
Property and Address	Value	Holder		Value
5148 Holly Ridge Farm Rd Raleigh, NC 27616 Wake County Valued at Zillow value	451,900.00	Shellpoint Mortgage Servicing Stoneridge Owners Assoc., Inc.	238,146.71 5,500.00	104,126.65 50% owned

VALUE CLAIMED AS EXEMPT: \$ 208,253.29

14. NORTH CAROLINA PENSION FUND EXEMPTIONS

-NONE-	
15. OTHER EXEMPTIONS CLAIMED UNDER LAWS OF THE STATE OF NORTH CAROLINA	
Constitutional personal property ("wild card") exemption, N.C. Const. Art. X § 1	1.000.00

16. FEDERAL PENSION FUND EXEMPTIONS

-NONE-	

17. OTHER EXEMPTIONS CLAIMED UNDER NONBANKRUPTCY FEDERAL LAW

-NONE-	

- 18. RECENT PURCHASES
- (a). List tangible personal property purchased by the debtor within ninety (90) days of the filing of the bankruptcy petition.

Description	Market <u>Value</u>	Lien Holder	Amount of Lien	Net <u>Value</u>
-NONE-				

(b). List any tangible personal property from 18(a) that is directly traceable to the liquidation or conversion of property that may be exempt and that was not acquired by transferring or using additional property.

Description of Replacement Property	Description of Property Liquidated or Converted that May Be Exempt

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- 19. The debtor's property is subject to the following claims:
- a. Of the United States or its agencies as provided by federal law.
- b. Of the State of North Carolina or its subdivisions for taxes, appearance bonds or fiduciary bonds;
- c. Of a lien by a laborer for work done and performed for the person claiming the exemption, but only as to the specific property affected.
- d. Of a lien by a mechanic for work done on the premises, but only as to the specific property affected.
- e. For payment of obligations contracted for the purchase of specific real property affected.
- f. For contractual security interests in specific property affected; provided, that the exemptions shall apply to the debtor's household goods notwithstanding any contract for a nonpossessory, nonpurchase money security interest in any such goods.
- g. For statutory liens, on the specific property affected, other than judicial liens.
- h. For child support, alimony or distributive award order pursuant to Chapter 50 of the General Statutes of North Carolina.
- i. For criminal restitution orders docketed as civil judgments pursuant to G.S. 15A-1340.38.
- j. Debts of a kind specified in 11 U.S.C. § 523(a)(1) (certain taxes), (5) (domestic support obligations).
- k. Debts of a kind specified in 11 U.S.C. § 522(c).

Claimant	Nature of Claim	Description of Property	Value of Property	Net <u>Value</u>
-NONE-				

None of the property listed in paragraph 18(a), except qualified replacement property under 18(b), has been included in this claim of exemptions.

None of the claims listed in paragraph 19 is subject to this claim of exemptions.

I declare that to the extent any exemptions I have claimed appear on its face to exceed the amount allowed by the applicable statute, I claim only the maximum amount allowed by statute.

#### UNSWORN DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF INDIVIDUAL TO SCHEDULE C-1 - PROPERTY CLAIMED AS EXEMPT

I, Alona C	<b>Chervina Keys</b> , declare under penalty of perj	ury that I have read the foregoing Schedule C	C-1 - Property Claimed as
Exempt, consisting of 5	sheets, and that they are true and correct to the be	est of my knowledge, information and belief.	
Executed on: Novem	ıber 3, 2024	/s/ Alona Chervina Keys	
		Alona Chervina Keys	
		Debtor	

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		60			
Fill in this in	formation to identify you	ır case:			
Debtor 1	Alona Chervina	Kevs			
	First Name	Middle Name Last Nam	e	-	
Debtor 2 (Spouse if, filing)	First Name	Middle Name Last Nam	e	-	
United States	Bankruptcy Court for the:	EASTERN DISTRICT OF NORTH CARC	DLINA	-	
Case number	24-03472-5-DMW				w.u
(if known)				_	if this is an ded filing
Official Fo	orm 106D				
		Who Have Claims Secu	red by Propert	: <b>y</b>	12/15
□ No. Ch ■ Yes. F	tors have claims secured by	his form to the court with your other schedule	s. You have nothing else	to report on this form.	
		more than one secured claim, list the creditor separ	Column A	Column B	Column C
for each claim.	If more than one creditor has	a particular claim, list the other creditors in Part 2. cal order according to the creditor's name.		Value of collateral that supports this claim	Unsecured portion If any
2.1 Shellp Service	oint Mortgage ing	Describe the property that secures the claim:	\$238,146.71	\$451,900.00	\$0.00
	x 10826	5148 Holly Ridge Farm Rd Raleigh, NC 27616 Wake County Valued at Zillow value As of the date you file, the claim is: Check all the	at		
29603-	ville, SC 0826	apply.  Contingent			
Number, S	Street, City, State & Zip Code	☐ Unliquidated			
Who owes the	e debt? Check one.	Disputed  Nature of lien. Check all that apply.			
☐ Debtor 1 on ☐ Debtor 2 on	ly	☐ An agreement you made (such as mortgage of car loan)	or secured		
	d Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lie	n)		

■ At least one of the debtors and another ☐ Check if this claim relates to a

Date debt was incurred 01/26/2016

community debt

☐ Judgment lien from a lawsuit

☐ Other (including a right to offset)

Last 4 digits of account number

8843

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Debtor 1 Alona Chervina Keys	Case number (if known)	24-03472-5-DMW		
First Name Middle N	ame Last Name			
2.2 State Employees Credit Union	Describe the property that secures the claim:	\$12,854.27	\$18,163.00	\$0.00
P.O. Box 25279 Raleigh, NC 27611	2018 Chrysler Pacifica 98,000 miles 1/2 interest in vehicle jointly owned with spouse. Vehicle valued at JD Power average retail of \$18,163.00. Location: 5148 Holly Ridge Farm Rd, Raleigh NC 27616  As of the date you file, the claim is: Check all that apply.			•
Number, Street, City, State & Zip Code	☐ Contingent ☐ Unliquidated			
	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	<ul> <li>An agreement you made (such as mortgage or car loan)</li> </ul>	secured		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)	)		
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
2.3 Stoneridge Owners Assoc., Inc.	Describe the property that secures the claim:	\$5,500.00	\$451,900.00	\$0.00
Creditor's Name c/o Sentry Management Inc. 2180 West State Rd. 434, Suite 5000 Longwood, FL 32779 Number, Street, City, State & Zip Code	5148 Holly Ridge Farm Rd Raleigh, NC 27616 Wake County Valued at Zillow value As of the date you file, the claim is: Check all that apply.  ☐ Contingent ☐ Unliquidated ☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	☐ An agreement you made (such as mortgage or car loan)	secured		
Debtor 1 and Debtor 2 only	■ Statutory lien (such as tax lien, mechanic's lien)	)		
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
Add the dollar value of your entries in C If this is the last page of your form, add Write that number here:  Part 2: List Others to Be Notified for		\$256,500 \$256,500		
trying to collect from you for a debt you o	e notified about your bankruptcy for a debt that youe to someone else, list the creditor in Part 1, and tyou listed in Part 1, list the additional creditors lais page.	d then list the collection age	ncy here. Similarly, if you h	ave more
Name, Number, Street, City, State & LOGS Legal Group LLP 10130 Perimeter Parkway Suite 400 Charlotte, NC 28216		which line in Part 1 did you enter 4 digits of account number	er the creditor? 2.1	

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Debto	r 1 Alona Cherv	rina Keys		Case number (if known)	24-03472-5-DMW	
	First Name	Middle Name	Last Name			
[]	Name, Number, Stre Roger W. Knig 8510 Six Forks Suite 102 Raleigh, NC 27	Rd.		On which line in Part 1 did you ent	<del></del>	
[]	Name, Number, Stre Sentry Manage 3109 Poplarwo Suite 310 Raleigh, NC 27	ood Ct		On which line in Part 1 did you ent	<del></del>	
[]	Name, Number, Stre Shellpoint PO Box 650840 Dallas, TX 7526			On which line in Part 1 did you ent	<del></del>	

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				00		-		
Fill in this inform	nation to identify your ca	ase:						
Debtor 1	Alona Chervina Ke	evs						
	First Name	Middle Na	me	Last Name				
Debtor 2 (Spouse if, filing)	First Name	Middle Na	me	Last Name				
United States Bar	nkruptcy Court for the:	EASTERN D	ISTRICT OF NO	RTH CAROLINA				
Case number 2	24-03472-5-DMW							
(if known)			<del>-</del>			☐ Check	k if this is an	
						amen	ded filing	
Official Form	106F/F							
	/F: Creditors Wh	no Have	Unsecured	Claims			12/15	5
	accurate as possible. Use				for creditors with NON	IPRIORITY claims. L		
Schedule D: Creditor left. Attach the Conname and case nun	tory Contracts and Unexpire ors Who Have Claims Secur tinuation Page to this page. nber (if known).	red by Propert . If you have n	y. If more space is o information to re	needed, copy the Pa	rt you need, fill it out,	number the entries	in the boxes	
	rs have priority unsecured of	claims agains	t you?					
☐ No. Go to Pa	art 2.							
Yes.								
identify what typ possible, list the	priority unsecured claims. In the of claim it is. If a claim has be claims in alphabetical order a chan one creditor holds a particular.	both priority ar according to th	nd nonpriority amous e creditor's name. I	nts, list that claim here f you have more than to	and show both priority a	and nonpriority amou	nts. As much a	as
(For an explana	tion of each type of claim, see	e the instruction	ns for this form in th	e instruction booklet.)	<b>T</b> . ( )   ( )	B. C. W	M	
					Total claim	Priority amount	Nonpriorit amount	y
	Cameron	La	st 4 digits of acco	unt number	\$6,000.00	\$6,000.00	<u> </u>	\$0.00
Priority Cre Camero	editor's Name n I aw	Wł	nen was the debt in	ncurred?				
	amasco Circle					-		
	, NC 27616 reet City State Zip Code		of the date way fil	a tha alaim ia. Ohl-	-11 46 -4 6 .			
	I the debt? Check one.		-	e, the claim is: Check	all that apply			
■ Debtor 1 o			Contingent					
_	,		Unliquidated					
☐ Debtor 2 o	-		Disputed pe of PRIORITY ur	secured claim:				
_	nd Debtor 2 only		Domestic support of					
_	e of the debtors and another		• • •	other debts you owe the				
	his claim is for a community	.,		personal injury while y				
Is the claim s	ubject to offset?	_	_	dministrative Ex				
☐ Yes		_		ttorney Fees	penses		_	
				ttorricy r ccs				
			<b>.</b>					
-	I of Your NONPRIORITY							
	rs have nonpriority unsecur	_	•					
☐ No. You hav	e nothing to report in this part	rt. Submit this fo	orm to the court with	your other schedules.				
Yes.								
unsecured clain	nonpriority unsecured clair n, list the creditor separately for or holds a particular claim, list	for each claim.	For each claim liste	d, identify what type of	claim it is. Do not list claim	aims already included	d in Part 1. If n	

Total claim

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Debto	r 1 Alona Chervina Keys	Case number (if known) 24-03472-5-DMV	V
4.1	Amazon Store Card	Last 4 digits of account number	\$217.00
	Nonpriority Creditor's Name 410 Terry Ave N	When was the debt incurred?	
	Seattle, WA 98109  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit Card Purchases	
4.2	Amazon Store Card	Last 4 digits of account number	\$200.00
	Nonpriority Creditor's Name  Box 71711	When was the debt incurred?	
	Philadelphia, PA 19176  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the diam is. Oneck an that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card Purchases	
4.3	Barclays Bank Delaware	Last 4 digits of account number	\$174.00
	Nonpriority Creditor's Name P.O. Box 8803 Wilmington, DE 19899	When was the debt incurred?	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other Specify	

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Deptor	Alona Chervina Keys	Case number (if known) 24-034/2-5-DN	IVV
4.4	BJ's Master Card Capital One	Last 4 digits of account number	\$4,000.00
	Nonpriority Creditor's Name PO Box 71087	When was the debt incurred?	
	Charlotte, NC 28272  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	□ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	Other. Specify Credit Card Purchases	
4.5	Bull City Financial	Last 4 digits of account number	\$399.00
	Nonpriority Creditor's Name 2609 N Duke St #500 Durham, NC 27704	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Collections	
4.6	Bull City Financial	Last 4 digits of account number	\$2,821.00
	Nonpriority Creditor's Name 2609 N Duke St #500	When was the debt incurred?	
	Durham, NC 27704  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other. Specify Collections	

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Debto	Alona Chervina Keys	Case number (if known) 24-03472-5-D	MW
4.7	Bull City Financial	Last 4 digits of account number	\$571.00
	Nonpriority Creditor's Name 2609 N Duke St #500	When was the debt incurred?	***************************************
	Durham, NC 27704  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collections	
4.8	Capital One Platinum Card	Last 4 digits of account number	\$3,578.00
	Nonpriority Creditor's Name PO Box 71083	When was the debt incurred?	
	Charlotte, NC 28272  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit Card Purchases	
4.9	Chase Freedom	Last 4 digits of account number	\$973.00
4.0	Nonpriority Creditor's Name		ψ373.00
	Cardmember Services PO Box 6294	When was the debt incurred?	
	Carol Stream, IL 60197		
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_	По	
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:  Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit Card Purchases	
		-r	

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Case number (if known) 24-034/2-5-DMV	•
Last 4 digits of account number	\$584.00
When was the debt incurred?	
As of the date you file the claim is: Check all that apply	
The of the date year me, the stant let. Officer an that apply	
☐ Contingent	
_ `	
•	
report as priority claims	
$\square$ Debts to pension or profit-sharing plans, and other similar debts	
■ Other. Specify Credit Card Purchases	
Local Admits of consumt number	\$502.00
Last 4 digits of account number	Ψ002.00
When was the debt incurred?	
As of the date you file, the claim is: Check all that apply	
·	
·	
<u> </u>	
<u></u>	
Other. Specify Credit Card Furchases	
Last 4 digits of account number	\$217.00
When was the debt incurred?	
when was the dept incurred?	
As of the date you file, the claim is: Check all that apply	
☐ Contingent	
☐ Unliquidated	
□ Disputed	
Type of NONPRIORITY unsecured claim:	
☐ Student loans	
☐ Obligations arising out of a separation agreement or divorce that you did not	
report as priority claims	
☐ Debts to pension or profit-sharing plans, and other similar debts	
■ Other. Specify Credit Card Purchases	
	Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  Contingent Disputed Type of NONPRIORITY unsecured claim: Student loans Debts to pension or profit-sharing plans, and other similar debts  Credit Card Purchases  Last 4 digits of account number When was the debt incurred?  As of the date you file, the claim is: Check all that apply Credit Card Purchases  Last 4 digits of account number When was the debt incurred?  As of the date you file, the claim is: Check all that apply Credit Card Purchases  Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply Credit Card Purchases  Credit Card Purchases  Last 4 digits of account number Creport as priority claims Debts to pension or profit-sharing plans, and other similar debts Credit Card Purchases  Last 4 digits of account number When was the debt incurred?  As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Disputed Type of NONPRIORITY unsecured claim: Student loans

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Debtor	1 Alona Chervina Keys	Case number (if known) 24-03472-5-DN	ıw
4.1	Jefferson Capital Systems, LLC	Last 4 digits of account number	\$425.00
3	Nonpriority Creditor's Name 200 14th Avenue Sartell, MN 56377	When was the debt incurred?	Ψ120100
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	$\square$ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collections	
4.1	Macy's Store Card	Last 4 digits of account number	\$39.00
	Nonpriority Creditor's Name 6716 Grade Lane Bldg. 9, Suite 910 Louisville, KY 40290	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card Purchases	
4.1	Paypal Cashback Mastercard	Last 4 digits of account number	\$3,022.00
5	Nonpriority Creditor's Name		Ψο,ο==σ
	PO Box 965004 Orlando, FL 32896	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit Card Purchases	

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Dept	or 1 Alona Chervina Keys	Case number (if known)	W				
4.1 6	Paypal Cashback Mastercard	Last 4 digits of account number	\$1,402.00				
0 ]	Nonpriority Creditor's Name PO Box 965004	When was the debt incurred?	. ,				
	Orlando, FL 32896 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.						
	Debtor 1 only	Contingent					
	Debtor 2 only	Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims					
	■ No	Debts to pension or profit-sharing plans, and other similar debts					
	Yes	■ Other. Specify Credit Card Purchases					
4.1 7	SCA Collection	Last 4 digits of account number	\$66.00				
	Nonpriority Creditor's Name 300 E Arlington Blvd # 6A Greenville, NC 27858	When was the debt incurred?					
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	■ Other. Specify Collections					
4.1	Synchrony Bank for TJX	Last 4 digits of account number	\$485.00				
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 71757	When was the debt incurred?					
	Philadelphia, PA 19176-1757						
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community debt	Student loans  Obligations origing out of a congretion agreement or diverse that you did not					
	Is the claim subject to offset?	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes ☐ Other. Specify Credit Card Purchases						

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Debte	or 1 Alona Chervina Keys	Case number (if known) 24-03472-5-DM	N
4.1	The Donk of Misseuri		¢677.00
9	The Bank of Missouri  Nonpriority Creditor's Name	Last 4 digits of account number	\$677.00
	PO Box 4477	When was the debt incurred?	
	Beaverton, OR 97076		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card Purchases	
4.2	WAKE COUNTY TAX		
0	ADMINISTRATION	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name	When we the debt incorred?	
	PO Box 2331 Raleigh, NC 27602-2331	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify ** FOR NOTICE PURPOSES ONLY **	
4.2		4004	<b></b>
1	Wake Radiology	Last 4 digits of account number 1324	\$1,480.29
	Nonpriority Creditor's Name PO Box 603435	When was the debt incurred?	
	Charlotte, NC 28260		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical Expenses	

#### Part 3: List Others to Be Notified About a Debt That You Already Listed

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Alona Chervina Keys		Case number (if known) 24-03472-5-DMW					
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?						
Capital One Bank	Line 4.8 of (Check one):	Part 1: Creditors with Priori	ity Unsecured Claims				
P.O. Box 30285		■ Part 2: Creditors with Nonpriority Unsecured Claims					
Salt Lake City, UT 84130-0285	Last 4 digits of account number						
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?						
Citibank	Line <b>4.10</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims					
P.O. Box 6530 The Lakes, NV 88901		■ Part 2: Creditors with Nonpriority Unsecured Claims					
The Lakes, IV 00001	Last 4 digits of account number						
Name and Address	On which entry in Part 1 or Part 2 did yo	ou list the original creditor?					
Wake Radiology	Line <b>4.21</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims					
P.O. Box 19368 Raleigh, NC 27619		Part 2: Creditors with Nonp	priority Unsecured Claims				
ivaleigh, NO 21013	Last 4 digits of account number						

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 6,000.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 6,000.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 21,832.29
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 21,832.29

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Fill in this infor	Fill in this information to identify your case:						
Debtor 1 Alona Chervina Keys							
	First Name	Middle Name	Last Name		I		
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		EASTERN DISTRICT C	F NORTH CAROLINA				
Case number	24-03472-5-DMW						
(if known)					_	Check if this is an amended filing	

#### Official Form 106G

#### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	h whom you have the cer, Street, City, State and ZIP Co	ontract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.3					
2.0	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4	,				
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
	•				

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Fill in th	nis information to identify your	case:		
Debtor '	1 Alona Chervina k	(eys		
Dabta = (	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if		Middle Name	Last Name	<del></del>
United S	States Bankruptcy Court for the:	EASTERN DISTRICT C	OF NORTH CAROLINA	
Case nu	umber <b>24-03472-5-DMW</b>			
(if known)	24-03472-3-516164			☐ Check if this is an
				amended filing
Offici	al Form 106H			
	edule H: Your Cod	ebtors		12/15
eople a	are filing together, both are equ	ally responsible for supposes on the left. Attach	olying correct information. If n the Additional Page to this	plete and accurate as possible. If two married more space is needed, copy the Additional Page, page. On the top of any Additional Pages, write
1. 🗅	Oo you have any codebtors? (If	you are filing a joint case,	do not list either spouse as a c	codebtor.
	No			
<b>■</b> Y	⁄es			
2. V	Vithin the last 8 vears, have you	ı lived in a community pr	roperty state or territory? (Co	ommunity property states and territories include
	ona, California, Idaho, Louisiana			
	No. Go to line 3.			
	es. Did your spouse, former spor	use, or legal equivalent live	e with you at the time?	
in li For	ine 2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make sure y	r spouse is filing with you. List the person shown ou have listed the creditor on Schedule D (Official Ise Schedule D, Schedule E/F, or Schedule G to fil
	Column 1: Your codebtor		C	Column 2: The creditor to whom you owe the debt
	Name, Number, Street, City, State and Z	P Code		check all schedules that apply:
3.1	Brian Keys			Schedule D, line2.1
	5148 Holly Ridge Farm Ro Raleigh, NC 27616	ł		Schedule E/F, line
	raioigii, ito 27010			I Schedule G hellpoint Mortgage Servicing
			3	nelipoint mortgage Servicing
3.2	Brian Keys			Schedule D, line2.3
	5148 Holly Ridge Farm Ro	i		Schedule E/F, line
	Raleigh, NC 27616			Schedule G
			S	toneridge Owners Assoc., Inc.
3.3	Brian Keys			Schedule D, line 2.2
	5148 Holly Ridge Farm Ro	l		Schedule E/F, line
	Raleigh, NC 27616			Schedule G
			S	tate Employees Credit Union

Official Form 106H Schedule H: Your Codebtors Page 1 of 1

						Ì			
	in this information to identify your countries to 1 Alona Chery								
	btor 2				_				
	ited States Bankruptcy Court for the	: _EASTERN DISTRICT	OF NORTH CARC	LINA	_				
Cas	se number 24-03472-5-DMW	1				Check if this is			
(If kr	nown)					☐ An amende	ed filing		
								ving postpetition e following date:	•
0	fficial Form 106I					MM / DD/ Y	YYYY		
S	chedule I: Your Inc	ome							12/1
spo atta Par	plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  The Describe Employment	r spouse is not filing wi	th you, do not inc	lude infor	matio	on about your spo	ouse. If	more space is	needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	2 or non	-filing spouse	
	If you have more than one job,	Employment status	☐ Employed			■ Empl	oyed		
	If you have more than one job, attach a separate page with information about additional employers.		■ Not employed				☐ Not employed		
	Include part-time, seasonal, or	Occupation				Networ	k Engi	neer	
	self-employed work.	Employer's name				Cisco S	System	s, Inc.	
	Occupation may include student or homemaker, if it applies.	Employer's address				170 We San Jo			
		How long employed the	here?				Years	, 2 Months	
Pai	rt 2: Give Details About Mor	nthly Income							
spoi	mate monthly income as of the duse unless you are separated.  but or your non-filing spouse have more space, attach a separate sheet to	ate you file this form. If you	·	•			·	·	J
						For Debtor 1		Debtor 2 or filing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	0.00	\$	10,682.52	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$_	0.00	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	0.00	\$	10,682.52	

Deb	tor 1	Alona Chervina Keys		Case	number (if known)	24-03472	-5-DMW	
				For	Debtor 1	For Debt		
	Con	y line 4 here	4.	\$	0.00		g spouse 10,682.52	
_		*		*-	0.00		0,002.02	-
5.		all payroll deductions:	_	•		•		
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$_ \$	0.00	\$	1,494.48	
	5b. 5c.	Mandatory contributions for retirement plans Voluntary contributions for retirement plans	5b. 5c.	* *	0.00	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$ _	0.00	\$	0.00	-
	5e.	Insurance	5e.	\$-	0.00	\$	310.00	
	5f.	Domestic support obligations	5f.	\$_	0.00	\$	0.00	
	5g.	Union dues	5g.	\$	0.00	\$	0.00	=
	5h.	Other deductions. Specify: Dental Plan	5h	+ \$ _	0.00	+ \$	36.00	
		Vision Plan		\$	0.00	\$	8.00	•
		Total Other Deductions		\$	0.00	\$	1,482.22	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	3,330.70	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	7,351.82	-
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$_	0.00	\$	0.00	-
	8c.	Family support payments that you, a non-filing spouse, or a depender regularly receive Include alimony, spousal support, child support, maintenance, divorce		· —				-
		settlement, and property settlement.	8c.	\$_	0.00	\$	0.00	-
	8d. 8e.	Unemployment compensation Social Security	8d. 8e.	\$ \$	0.00	\$	0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:		\$_ \$	0.00	\$\$	0.00	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	0.00	-
	8h.	Other monthly income. Specify: Bonus (pro-rated, estimated)	8h	+ \$	0.00	+ \$	1,159.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	1,159.00	D
40	0-1	aulata manthh in cama Add Fac 7 a Fac 0	40		0.00	0.540.0		0.540.00
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		0.00 + \$	8,510.8	<b>32</b> = \$	8,510.82
11.	1. State all other regular contributions to the expenses that you list in Schedule J.  Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify:  11. +\$							0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Certilies					2. \$	8,510.82
							Combin	ned
13.	Do y	you expect an increase or decrease within the year after you file this form	m?				monthly	y income
	_	Yes. Explain:						
		. 00. = . piani.						

Official Form 106l Schedule I: Your Income page 2

Fill	in this infor	rmation to identify yo	our case:									
Deb	Alona Chervina Keys					Check if this is:						
Deb	tor 2							•	ng postpetition chapter			
	ouse, if filing	)							ne following date:			
United States Bankruptcy Court for the: EASTERN DISTRICT OF NORTH CAROLINA							MM / DD / YYYY					
	e numbe <b>r</b> nown)	24-03472-5-DM\	N									
Of	ficial F	orm 106J										
Sc	chedu	le J: Your	Exper	ises					12/15			
Be a	as comple ormation. I	ete and accurate as	possible eded, atta	. If two married people ar ch another sheet to this								
Part 1.		scribe Your House	hold									
١.	Is this a joint case?											
	■ No. Go to line 2.  □ Yes. Does Debtor 2 live in a separate household?											
	□ No											
	_	_	st file Offic	al Form 106J-2, <i>Expenses</i>	for Separate House	hold of De	ebtor 2.					
2.	Do you have dependents? ☐ No											
	Do not lis	st Debtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Depende age	ent's	Does dependent live with you?			
	Do not st	ate the							□ No			
		nts names.			Child		10		Yes			
									□ No			
					Child		12		■ Yes			
					Child		14		□ No ■ Yes			
					- Ciliid				■ Yes □ No			
									☐ Yes			
3.		expenses include		No								
		s of people other t and your depende		Yes								
exp	imate you	of a date after the	our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp								
the		such assistance an		government assistance i cluded it on <i>Schedule I:</i> )			Yo	ur expe	nses			
•		,										
4.	The rental or home ownership expenses for your residence. Include first m payments and any rent for the ground or lot.				nclude first mortgage	4.	\$		0.00			
	If not inc	luded in line 4:										
	4a. Re	eal estate taxes				4a.	\$		0.00			
	4b. Pro	operty, homeowner's	s, or renter	's insurance		4b.	·		0.00			
		me maintenance, re				4c.			500.00			
E		meowner's associa			ma aquitulare	4d.	·		50.00			
5.	Addition	iai mortgage paym	ents for yo	<b>our residence,</b> such as ho	me equity loans	5.	Ф		0.00			

Debtor 1 Alona Chervina Keys	C	case number (if known)	24-03472-5-DMW				
6. Utilities:							
6a. Electricity, heat, natural gas		6a. \$	385.00				
6b. Water, sewer, garbage collection		6b. \$	180.00				
6c. Telephone, cell phone, Internet, sate	llite, and cable services	6c. \$	600.00				
6d. Other. Specify:	,	6d. \$	0.00				
. Food and housekeeping supplies		- 7. \$	1,400.00				
Childcare and children's education cost	s	8. \$	420.00				
. Clothing, laundry, and dry cleaning	-	9. \$	200.00				
Personal care products and services		10. \$	300.00				
Medical and dental expenses		11. \$	104.00				
<ol> <li>Transportation. Include gas, maintenance</li> </ol>	bus or train fare	· · · · · · · · · · · · · · · · · · ·					
Do not include car payments.	, 0000 000	12. \$	450.00				
3. Entertainment, clubs, recreation, newsp	apers, magazines, and books	13. \$	0.00				
1. Charitable contributions and religious d	-	14. \$	100.00				
5. Insurance.		-					
Do not include insurance deducted from yo	ur pay or included in lines 4 or 20.						
15a. Life insurance		15a. \$	178.00				
15b. Health insurance		15b. \$	0.00				
15c. Vehicle insurance		15c. \$	185.00				
15d. Other insurance. Specify: Pet Insu	rance	15d. \$	54.60				
Home Warranty			64.00				
5. <b>Taxes.</b> Do not include taxes deducted from	your pay or included in lines 4 or 20.						
Specify:		16. \$	0.00				
7. Installment or lease payments:							
17a. Car payments for Vehicle 1		17a. \$	500.00				
17b. Car payments for Vehicle 2		17b. \$	0.00				
17c. Other. Specify:		17c. \$	0.00				
17d. Other. Specify:		17d. \$	0.00				
3. Your payments of alimony, maintenance		40 ft	0.00				
deducted from your pay on line 5, Scheo		18. \$					
Other payments you make to support of		\$	150.00				
Specify: Assistance for Debtor's Eld		19.					
Other real property expenses not includ	ea in lines 4 or 5 of this form or on <i>Schedi</i>		0.00				
20a. Mortgages on other property		20a. \$	0.00				
20b. Real estate taxes		20b. \$	0.00				
20c. Property, homeowner's, or renter's in		20c. \$	0.00				
20d. Maintenance, repair, and upkeep exp		20d. \$	0.00				
20e. Homeowner's association or condom	ninium dues	20e. \$	0.00				
Pet Care		21. +\$	150.00				
Non-Filing Spouse's Unsecured Del		+\$	100.00				
Proposed Chapter 13 Plan Payment		+\$	2,440.00				
2. Calculate your monthly expenses			7				
22a. Add lines 4 through 21.		\$	8,510.60				
22b. Copy line 22 (monthly expenses for D	ebtor 2), if any, from Official Form 106.I-2	\$	0,010.00				
· · · · ·	• • • • • • • • • • • • • • • • • • • •	·	0.540.00				
22c. Add line 22a and 22b. The result is yo	our montrily expenses.	\$	8,510.60				
3. Calculate your monthly net income.							
23a. Copy line 12 (your combined month)	y income) from Schedule I.	23a. \$	8,510.82				
23b. Copy your monthly expenses from lir		23b\$	8,510.60				
23c. Subtract your monthly expenses from			0.00				
The result is your monthly net incom	<i>e</i> .	23c. \$	0.22				
	na e se						
Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a							
	modification to the terms of your mortgage?						
		g-g- p-)					

Fill in this info	ormation to identify your	case:					
Debtor 1	Alona Chervina K	Alona Chervina Keys					
	First Name	Middle Name	Last Name				
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name				
United States E	Bankruptcy Court for the:	EASTERN DISTRICT O	DF NORTH CAROLINA				
Case number (if known)	24-03472-5-DMW				☐ Check if this is an amended filing		
Official Fo	rm 106Dec						
Declara	tion About a	n Individual	<b>Debtor's Scho</b>	edules	12/15		
obtaining mon years, or both.		n connection with a bank			nent, concealing property, or , or imprisonment for up to 20		
Did you p	pay or agree to pay some	one who is NOT an attor	rney to help you fill out bank	ruptcy forms?			
■ No							
					Bankruptcy Petition Preparer's Notice, ration, and Signature (Official Form 119)		
that they a	ona Chervina Keys	that I have read the sum	nmary and schedules filed w	ith this declaration	,		
	a Chervina Keys ture of Debtor 1		Signature of Deb	otor 2			

Date November 3, 2024

Date

Fill	in this	information to identify your	case:				
Del	otor 1	Alona Chervina					
Dol	otor 2	First Name	Middle Name	Last Name			
	use if, filing	g) First Name	Middle Name	Last Name			
Uni	ted Stat	es Bankruptcy Court for the:	EASTERN DISTRICT O	OF NORTH CAROLIN	NA .		
	se numb	per <b>24-03472-5-DMW</b>					
(if kr	iown)					_	heck if this is an mended filing
							monaca ming
∩f	ficial	Form 107					
		ent of Financial	Affairs for Indiv	iduals Filing	ı for Bankrup	tcv	04/2
		olete and accurate as possi			· •		
info	rmation	<ol> <li>If more space is needed,</li> </ol>	attach a separate sheet t				
num	iber (if I	known). Answer every ques	stion.				
Par	t 1:	Give Details About Your Ma	rital Status and Where Yo	ou Lived Before			
1.	What is	s your current marital statu	s?				
	■ N4:	arried					
	_	ot married					
2.	During	the last 3 years, have you	lived anywhere other tha	n whore you live no	.w2		
۷.	During	ille last 3 years, llave you	iived allywhere other tha	ii wilere you live iio	·w·:		
	■ No						
	⊔ Ye	es. List all of the places you li	ved in the last 3 years. Do	not include where yo	ou live now.		
	Debto	or 1:	Dates Debtor lived there	1 Debtor 2	2 Prior Address:		Dates Debtor 2 lived there
2	Within	the last 8 years, did you ev	ver live with a snouse or l	egal equivalent in a	community property	state or territory	? (Community property
state		erritories include Arizona, Cal					
	■ No	0					
	_	o es. Make sure you fill out <i>Sch</i>	nedule H: Your Codebtors (	Official Form 106H).			
Par	t 2	Explain the Sources of You	r Income				
4.		u have any income from en					ndar years?
		he total amount of income your are filing a joint case and you					
	■ No	0					
	_	es. Fill in the details.					
			Debtor 1		Debtor 2		
			Sources of income	Gross income	Sources of	of income	Gross income
			Check all that apply.	(before deduction			(before deductions
				exclusions)			and exclusions)

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Debtor 1 Alona Chervina Keys Case number (if known) 24-03472-5-DMW

5.	Include in and other winnings.	come regard public benef If you are fili	less of whether that inc it payments; pensions; ng a joint case and you	come is taxable. Exan rental income; interes a have income that yo	previous calendar years?  pples of other income are a st; dividends; money collect u received together, list it o	alimony; child suppo sted from lawsuits; i only once under De	royalties; and btor 1.	
	List each	source and t	ne gross income from 6	eacn source separate	ly. Do not include income t	nat you listed in line	e 4.	
	■ No □ Yes.	Fill in the de	tails.					
			Debtor 1	1		Debtor 2		
				of income	Gross income from each source (before deductions and exclusions)	Sources of inco		Gross income (before deductions and exclusions)
Pa	rt 3: Lis	t Certain Pa	vments You Made Be	fore You Filed for B	ankruptcv			
Are either Debtor 1's or Debtor 2's debts primarily consumer debts?  No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred individual primarily for a personal, family, or household purpose."  During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$7,575* or more?  No. Go to line 7.  Yes List below each creditor to whom you paid a total of \$7,575* or more in one or more payments and the total amount paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, not include payments to an attorney for this bankruptcy case.  * Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.  Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.  During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?  No. Go to line 7.  Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments attorney for this bankruptcy case.							e total amount you nd alimony. Also, do creditor. Do not	
	Creditor	's Name and	d Address	Dates of paymen	t Total amount paid	Amount you still owe	Was this pa	ayment for
		dinary pay and loans	ments, in part,		\$0.00	\$0.00	☐ Mortgage ☐ Car ☐ Credit Coon Re ☐ Suppliers	ard

Paid ordinary payments, in part, on bills and loans.		\$0.00	\$0.00	<ul> <li>☐ Mortgage</li> <li>☐ Car</li> <li>☐ Credit Card</li> <li>☐ Loan Repayment</li> <li>☐ Suppliers or vendors</li> <li>☐ Other</li> </ul>
State Employees Credit Union P.O. Box 25279 Raleigh, NC 27611	9/2024 8/2024 7/2024	\$1,500.00	\$12,854.27	<ul> <li>☐ Mortgage</li> <li>☐ Car</li> <li>☐ Credit Card</li> <li>☐ Loan Repayment</li> <li>☐ Suppliers or vendors</li> <li>☐ Other</li> </ul>

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Debtor 1 Alona Chervina Keys Case number (if known) 24-03472-5-DMW Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. **Insider's Name and Address Total amount** Amount you Reason for this payment Dates of payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address** Amount you **Total amount** Reason for this payment Dates of payment still owe Include creditor's name paid Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number Stoneridge Owners Assoc., Inc. vs. Claim of Lien **Wake County District Court** □ Pending **Brian Keys and Alona Keys** Attn: Clerk (HOA) □ On appeal 23M004922-910 316 Favetteville St. Concluded Raleigh, NC 27601 Lien against Debtor In the Matter of a Foreclosure of a **Foreclosure** Wake County Superior Pending **Deed of Trust Executed by Brian** Court ☐ On appeal Keys and Alona Keys... Attn: Clerk □ Concluded 24SP000547-910 316 Fayetteville St. Raleigh, NC 27601 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below **Creditor Name and Address Describe the Property** Value of the Date property **Explain what happened** 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

Yes. Fill in the details.

**Creditor Name and Address** Describe the action the creditor took Date action was Amount taken

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Case number (if known) 24-03472-5-DMW

12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a	cy, was any of your property in the possession of an nother official?	assignee for the bend	efit of creditors, a				
	■ No							
	☐ Yes							
Pa	t 5: List Certain Gifts and Contributions							
13.	No	etcy, did you give any gifts with a total value of more t	han \$600 per person	?				
	Yes. Fill in the details for each gift.	Decaribe the sifts	Dates you gave	Value				
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value				
	Person to Whom You Gave the Gift and Address:							
14.	Within 2 years before you filed for bankrup ■ No	etcy, did you give any gifts or contributions with a total	al value of more than	\$600 to any charity?				
	Yes. Fill in the details for each gift or cor		_					
	Gifts or contributions to charities that tot more than \$600 Charity's Name	al Describe what you contributed	Dates you contributed	Value				
	Address (Number, Street, City, State and ZIP Code)							
Pai	t 6: List Certain Losses							
15.	Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?							
	■ No □ Yes. Fill in the details.							
		escribe any insurance coverage for the loss	Date of your	Value of property				
		nclude the amount that insurance has paid. List pending asurance claims on line 33 of Schedule A/B: Property.	loss	lost				
Pai	t 7: List Certain Payments or Transfers							
16.	consulted about seeking bankruptcy or pre	cy, did you or anyone else acting on your behalf pay or eparing a bankruptcy petition? parers, or credit counseling agencies for services require		rty to anyone you				
	□ No							
	Yes. Fill in the details.							
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	Description and value of any property transferred	Date payment or transfer was made	Amount of payment				
	Sheree Cameron Cameron Law 8019 Atamasco Circle Raleigh, NC 27616 cameronbk.com	Attorney Fees	9/13/2024	\$500.00				
	Butterfly Financial Education, Inc. 96 Oak Creek Drive Clayton, NC 27520 butterflyfe.com	Credit Counseling Cost	9/26/2024	\$25.00				

Debtor 1 Alona Chervina Keys

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Debtor 1 Alona Chervina Keys

Case number (if known) 24-03472-5-DMW

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.						
	□ No					
	Yes. Fill in the details.					
	Person Who Was Paid Address	Description and v transferred	alue of any prope	erty	Date payment or transfer was made	Amount of payment
	QLS Legal Services 445 South Figueroa Street Los Angeles, CA 90071	Representation in dealing with in company/forecle	mortgage	spouse	3/2024 - 7/2024 monthly	\$4,000.00
18.	Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your bus include both outright transfers and transfers made include gifts and transfers that you have already lined in the work of the w	iness or financial affa e as security (such as the isted on this statement.	irs? he granting of a se	curity interes	t or mortgage on your	property). Do not
	Person Who Received Transfer Address Person's relationship to you	Description and v property transferr			any property or received or debts change	Date transfer was made
19.	Within 10 years before you filed for bankruptc beneficiary? (These are often called asset-protection No  Yes. Fill in the details.		y property to a se	elf-settled tru	ist or similar device o	of which you are a
	Name of trust	Description and v	alue of the prope	rty transferre	ed	Date Transfer was made
Par	List of Certain Financial Accounts, Instru	uments, Safe Deposit	Boxes, and Stora	age Units		
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or chouses, pension funds, cooperatives, associa  No Yes. Fill in the details.	other financial accour	nts; certificates of			
		ast 4 digits of ccount number	Type of account instrument	clo mo	te account was sed, sold, ved, or nsferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 yea cash, or other valuables?	ar before you filed for	bankruptcy, any	safe deposit	box or other deposi	tory for securities,
	<ul><li>No</li><li>Yes. Fill in the details.</li></ul>					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, State and ZIP Code)		escribe the o	Do you still have it?	
	SECU 6408 Hilburn Dr Raleigh, NC 27613	Brian Keys and Keys		aperwork	-petition.	■ No □ Yes

Debtor 1 Alona Chervina Keys

Case number (if known) 24-03472-5-DMW

22.	2. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?  No								
	Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?					
Par	9: Identify Property You Hold or Control for	r Someone Else							
23.	Do you hold or control any property that some for someone.	eone else owns? Include any prope	rty you borrowed from, are storing for	, or hold in trust					
	■ No □ Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value					
Par	10: Give Details About Environmental Inform	nation							
For	he purpose of Part 10, the following definitions	s apply:							
	Environmental law means any federal, state, o toxic substances, wastes, or material into the regulations controlling the cleanup of these su	air, land, soil, surface water, groun ubstances, wastes, or material.	dwater, or other medium, including st	atutes or					
	Site means any location, facility, or property as to own, operate, or utilize it, including disposa		law, whether you now own, operate, o	or utilize it or used					
	Hazardous material means anything an enviro hazardous material, pollutant, contaminant, or		s waste, hazardous substance, toxic s	substance,					
Rep	ort all notices, releases, and proceedings that y	you know about, regardless of whe	n they occurred.						
24.	Has any governmental unit notified you that yo	ou may be liable or potentially liable	e under or in violation of an environme	ental law?					
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State ar ZIP Code)	Environmental law, if you know it	Date of notice					
25.	Have you notified any governmental unit of an	y release of hazardous material?							
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State ar ZIP Code)	Environmental law, if you know it	Date of notice					
26.	Have you been a party in any judicial or admin	istrative proceeding under any env	ironmental law? Include settlements a	and orders.					
	■ No □ Yes. Fill in the details.								
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case					
Par	11: Give Details About Your Business or Co	nnections to Any Business							
27.	Within 4 years before you filed for bankruptcy,	, did you own a business or have a	ny of the following connections to any	business?					
	lacksquare A sole proprietor or self-employed in a	trade, profession, or other activity	, either full-time or part-time						
	☐ A member of a limited liability compan	y (LLC) or limited liability partnersh	nip (LLP)						
Offici	al Form 107 Statement	of Financial Affairs for Individuals Filin	g for Bankruptcy	page 6					

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Debtor 1 Alona Chervina Keys		Case number (if known) <b>24-03472-5-DMW</b>							
☐ A partner in a partnership									
·									
☐ An officer, director, or managing exc —	•								
☐ An owner of at least 5% of the voting	g or equity securities of a corporation								
No. None of the above applies. Go to P	No. None of the above applies. Go to Part 12.								
☐ Yes. Check all that apply above and fill	in the details below for each business.								
Business Name	Describe the nature of the business	Employer Identification number							
Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security number or ITIN.							
		Dates business existed							
	cy, did you give a financial statement to	anyone about your business? Include all financial							
institutions, creditors, or other parties.									
■ No									
Yes. Fill in the details below.									
Name Address	Date Issued								
(Number, Street, City, State and ZIP Code)									
Part 12: Sign Below									
	false statement, concealing property, or	I declare under penalty of perjury that the answers obtaining money or property by fraud in connection tears, or both.							
/s/ Alona Chervina Keys									
Alona Chervina Keys Signature of Debtor 1	Signature of Debtor 2								
Date November 3, 2024	Date								
Did you attach additional pages to Your Stateme	ent of Financial Affairs for Individuals Fil	ing for Bankruptcy (Official Form 107)?							
■ No									
☐ Yes									
Did you pay or agree to pay someone who is not  ■ No	an attorney to help you fill out bankrup	tcy forms?							
☐ Yes. Name of Person . Attach the Bankru	ptcy Petition Preparer's Notice, Declaration	, and Signature (Official Form 119).							

Fill in this information to identify your case:							
Debtor 1	Alona Chervina Keys						
Debtor 2 (Spouse, if filing)							
United States E	Bankruptcy Court for the: Eastern District of North Carolina						
Case number (if known)	24-03472-5-DMW						

Check as directed in lines 17 and 21:  According to the calculations required by this Statement:							
•	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).						
	3. The commitment period is 3 years.						
	4. The commitment period is 5 years.						

☐ Check if this is an amended filing

### Official Form 122C-1

### **Chapter 13 Statement of Your Current Monthly Income** and Calculation of Commitment Period

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

#### Part 1: Calculate Your Average Monthly Income 1. What is your marital and filing status? Check one only. □ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B, lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 0.00 11,878.39 payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments

Net monthly income from a business, profession, or farm \$

5. Net income from operating a business,

Gross receipts (before all deductions)

Ordinary and necessary operating expenses

0.00 -\$

0.00

0.00

0.00

0.00

Copy here -> \$

Debtor 1

\$

Debtor 1

\$

Ordinary and necessary operating expenses \$ Net monthly income from rental or other real property

0.00 Copy here -> \$ 0.00

0.00

0.00

0.00

0.00

0.00

you listed on line 3.

profession, or farm

24-03472-5-DMW

Case number (if known)

Column B Column A Debtor 1 Debtor 2 or non-filing spouse 0.00 0.00 \$ 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you\_\_\_\_ 0.00 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled 0.00 0.00 if retired under any provision of title 10 other than chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 0.00 Total amounts from separate pages, if any. 0.00 0.00 11. Calculate your total average monthly income. Add lines 2 through 10 for 0.00 11,878.39 11,878.39 each column. Then add the total for Column A to the total for Column B. monthly income Part 2: **Determine How to Measure Your Deductions from Income** 12. Copy your total average monthly income from line 11. 11,878.39 13. Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. **Non-Filing Spouse's Unsecured Debt Payment** 100.00 100.00 Copy here=> 11,778.39 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 11,778.39 15a. Copy line 14 here=>

Alona Chervina Keys

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Debtor 1	Αl	ona Chervina Keys		Case number (if known)	24-03472-5-DMW			
	ı	Multiply line 15a by 12 (the number of months i	n a year).			<b>x</b> 12		
1	5b. ·	The result is your current monthly income for th	ne year for this part of the	form		\$141,340.68_		
16. <b>C</b> a	ılcula	te the median family income that applies to	you. Follow these steps:					
16	a. Fill	in the state in which you live.	NC					
16	b. Fill	in the number of people in your household.	5					
	To ins	in the median family income for your state and find a list of applicable median income amount tructions for this form. This list may also be avai	s, go online using the link			\$119,490.00		
17. <b>Hc</b>	w do	the lines compare?						
17	a.	☐ Line 15b is less than or equal to line 16c. 11 U.S.C. § 1325(b)(3). <b>Go to Part 3.</b> Do						
17	b.	Line 15b is more than line 16c. On the top 1325(b)(3). Go to Part 3 and fill out Calc your current monthly income from line 14 s	ulation of Your Disposa					
Part 3:	C	Calculate Your Commitment Period Under 11	U.S.C. § 1325(b)(4)					
18. <b>C</b> c	ру у	our total average monthly income from line	11		\$	11,878.39		
co sp	ntend ouse'	the marital adjustment if it applies. If you are that calculating the commitment period under s income, copy the amount from line 13. The marital adjustment does not apply, fill in 0 or	11 U.S.C. § 1325(b)(4) all		our <b>-</b> \$	100.00		
19	b. <b>Su</b>	btract line 19a from line 18.				\$11,778.39_		
	_	te your current monthly income for the year	Follow these steps:			<sub>\$</sub> 11,778.39		
20		py line 19b				Ψ		
	IVIU	ltiply by 12 (the number of months in a year).				x 12		
20	b. Th	e result is your current monthly income for the	year for this part of the for	rm		\$141,340.68_		
20	c. Co	py the median family income for your state and	I size of household from li	ne 16c		\$119,490.00_		
21	. Ho	w do the lines compare?						
		Line 20b is less than line 20c. Unless otherw period is 3 years. Go to Part 4.	rise ordered by the court,	on the top of page 1 of this f	orm, check bo	ox 3, The commitment		
		Line 20b is more than or equal to line 20c. U commitment period is 5 years. Go to Part 4.	nless otherwise ordered b	by the court, on the top of pa	ge 1 of this fo	rm, check box 4, The		
	signi	ign Below  ng here, under penalty of perjury I declare that	the information on this sta	atement and in any attachme	ents is true an	d correct.		
A	lona	ona Chervina Keys Chervina Keys						
	•	ure of Debtor 1  ovember 3, 2024						
	M	M/DD/YYYY						
•		necked 17a, do NOT fill out or file Form 122C-2 necked 17b. fill out Form 122C-2 and file it with		nat form convivour current m	onthly incom	from line 14 above		

Official Form 122C-1

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Debtor 1 Alona Chervina Keys Case number (if known) 24-03472-5-DMW

Fill in	this information to identify your case:	
Debto	Alona Chervina Keys	
Debtoi (Spous	r 2 se, if filing)	
United	States Bankruptcy Court for the: Eastern District of North Caroli	na
Case r	number <b>24-03472-5-DMW</b> wn)	☐ Check if this is an amended filing
	Profit 122C-2  pter 13 Calculation of Your Dispose	able Income 04/22
	out this form, you will need your completed copy of <i>Chapter 1</i> itment Period (Official Form 122C-1).	3 Statement of Your Current Monthly Income and Calculation of
space		filing together, both are equally responsible for being accurate. If more e number to which additional information applies. On the top any
Part 1	Calculate Your Deductions from Your Income	
the		ndards for certain expense amounts. Use these amounts to answer the sing the link specified in the separate instructions for this form. This .
exp		actual expense. In later parts of the form, you will use some of your actual erating expenses that you subtracted from income in lines 5 and 6 of Form ir spouse's income in line 13 of Form 122C–1.
If yo	our expenses differ from month to month, enter the average expens	se.
Note	e: Line numbers 1-4 are not used in this form. These numbers app	ly to information required by a similar form used in chapter 7 cases.
5.	The number of people used in determining your deductions	from income
	Fill in the number of people who could be claimed as exemptions plus the number of any additional dependents whom you support the number of people in your household.	
Nati	ional Standards You must use the IRS National Standar	rds to answer the questions in lines 6-7.
6.	<b>Food, clothing, and other items:</b> Using the number of people y Standards, fill in the dollar amount for food, clothing, and other items.	
7.	Out-of-pocket health care allowance: Using the number of peothe dollar amount for out-of-pocket health care. The number of people who are 65 or olderbecause older people have a higher higher than this IRS amount, you may deduct the additional amount.	eople is split into two categoriespeople who are under 65 and IRS allowance for health car costs. If your actual expenses are

Alona Chervina Keys 24-03472-5-DMW Debtor 1 Case number (if known) People who are under 65 years of age 7a. Out-of-pocket health care allowance per person 83 7b. Number of people who are under 65 5 7c. Subtotal. Multiply line 7a by line 7b. 415.00 Copy here=> \$ 415.00 People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person 158 7e. Number of people who are 65 or older 0 7f. Subtotal. Multiply line 7d by line 7e. 0.00 \$ Copy here=> 0.00 7g. Total. Add line 7c and line 7f 415.00 Copy total here=> \$ 415.00 Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill 800.00 in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 2,039.00 listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Name of the creditor Average monthly payment **Shellpoint Mortgage Servicing** 1,558.34 \$ Stoneridge Owners Assoc., Inc. 91.67 Сору Repeat this amount 1,650.01 1.650.01 9b. Total average monthly payment here=> on line 33a 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage Copy 388.99 388.99 here=> or rent expense). If this number is less than \$0, enter \$0. 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and 0.00 affects the calculation of your monthly expenses, fill in any additional amount you claim. Explain why:

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Case number (if known) 24-03472-5-DMW

11. Local	I transportation expense	s: Check the number of vehi	cles for which you	claim an o	wnershi	p or operating	g expense.		
<b>□</b> 0.	Go to line 14.								
<b>■</b> 1.	Go to line 12.								
<b>□</b> 2 c	or more. Go to line 12.								
		sing the IRS Local Standards perating Costs that apply for						\$	260.00
You m		pense: Using the IRS Local if you do not make any loan							
Vehicle 1	Describe Vehicle 1:	2018 Chrysler Pacifica jointly owned with spo average retail of \$18,10 Rd, Raleigh NC 27616	ouse. Vehicle va	lued at J	D Pow	er			
13a. Owne	ership or leasing costs usin	g IRS Local Standard			\$	619.00			
	age monthly payment for all	I debts secured by Vehicle 1 vehicles.							
are co		ly payment here and on line cured creditor in the 60 mon							
1	Name of each creditor fo	r Vehicle 1	Average month payment	ly					
\$	State Employees Cred	it Union	\$ 236	.44					
	Total A	Average Monthly Payment	\$236	4 4	ppy re =>	-\$236	Repeat amount line 33b	on	
	ehicle 1 ownership or leas act line 13b from line 13a.	e expense if this number is less than \$0	), enter \$0		\$	382.56	Copy net Vehicle 1 expense he	ere \$	382.56
Vehicle 2	Describe Vehicle 2:								
13d. Owne	ership or leasing costs usin	g IRS Local Standard			\$	0.00			
	age monthly payment for ald vehicles.	I debts secured by Vehicle 2	2. Do not include co	sts for					
١	Name of each creditor fo	r Vehicle 2	Average month payment	ly					
_			_ \$						
	Total a	average monthly payment	\$	Co he =>		0.0	Repeat this amount on 33c.		
	ehicle 2 ownership or leas	·					Copy net Vehicle 2		
Subtra	act line 13e from line 13d.	if this number is less than \$0	), enter \$0		\$	0.00	expense h	ere \$	0.00
		e: If you claimed 0 vehicles e allowance regardless of					n the	\$	0.00
also d	deduct a public transportati	on expense: If you claimed on expense, you may fill in v cal Standard for <i>Public Trans</i>	vhat you believe is				ou may	\$	0.00

**Alona Chervina Keys** 

Debtor 1 Alona Chervina Keys Case number (if known) 24-03472-5-DMW

	Other Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories.					
16.	<b>Taxes:</b> The total monthly amount that you will actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. Do not include real estate, sales, or use taxes.			\$	1,924.47	
17.	<b>Involuntary deductions:</b> The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs.					
	Do not include amounts th	at are not required by your jo	ob, such as voluntary 40	01(k) contributions or payroll savings.	\$	0.00
18.	<b>Life Insurance:</b> The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance.  Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.				\$	178.00
19.	administrative agency, suc	The total monthly amount the spousal or child support past due obligations for sp	rt payments.	by the order of a court or  You will list these obligations in line 35.	\$	0.00
20.		thly amount that you pay for		<b>G</b>		
	as a condition for your j					
	for your physically or m	entally challenged depender	nt child if no public educ	ation is available for similar services.	\$	0.00
21.		hly amount that you pay for coord		sitting, daycare, nursery, and preschool.	\$	0.00
22.	Additional health care exthat is required for the health savings account	penses, excluding insuran	nce costs: The monthly ir dependents and that is hat is more than the tota		\$	0.00
23.	3. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted.					0.00
24.	24. Add all of the expenses allowed under the IRS expense allowances. Add lines 6 through 23.				\$	6,762.02
hhΔ						
Auu	itional Expense Deductio		deductions allowed by th any expense allowances			
	Health insurance, disabil	Note: Do not include a lity insurance, and health s	any expense allowances savings account expen		ır	
	Health insurance, disabil insurance, disability insura	Note: Do not include a lity insurance, and health s	any expense allowances savings account expen	s listed in lines 6-24.  ses. The monthly expenses for health	r	
	Health insurance, disabilinsurance, disability insurayour dependents.	Note: Do not include a lity insurance, and health s	any expense allowances savings account expen counts that are reasonab	s listed in lines 6-24.  ses. The monthly expenses for health	ır	
	Health insurance, disabilinsurance, disability insurayour dependents. Health insurance	Note: Do not include a lity insurance, and health s nce, and health savings according	savings account expension to the counts that are reasonab \$	s listed in lines 6-24.  ses. The monthly expenses for health	r	
	Health insurance, disabilinsurance, disability insurance your dependents. Health insurance Disability insurance	Note: Do not include a lity insurance, and health s nce, and health savings according	savings account expensions that are reasonab  \$ 393.33   \$ 37.40	s listed in lines 6-24.  ses. The monthly expenses for health	sr\$	1,063.22
	Health insurance, disabilinsurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this	Note: Do not include a lity insurance, and health s nce, and health savings according to the sav	savings account expensions that are reasonables \$\frac{393.33}{37.40}\$	s listed in lines 6-24.  nses. The monthly expenses for health bly necessary for yourself, your spouse, o		1,063.22
	Health insurance, disabilinsurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this	Note: Do not include a lity insurance, and health s nce, and health savings according to total amount?	savings account expensions that are reasonables \$\frac{393.33}{37.40}\$	s listed in lines 6-24.  nses. The monthly expenses for health bly necessary for yourself, your spouse, o		1,063.22
25.	Health insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account  Total  Do you actually spend this No. How much do yes  Continuing contributions continue to pay for the rea your household or membe	Note: Do not include a lity insurance, and health since, and health savings according total amount?  you actually spend?  s to the care of household a sonable and necessary care	savings account expensions that are reasonables and a second seco	copy total here=>  me actual monthly expenses that you will rly, chronically ill, or disabled member of such expenses. These expenses may		1,063.22
25.	Health insurance, disabilinsurance, disability insurance your dependents. Health insurance Disability insurance Health savings account  Total  Do you actually spend this No. How much do yes  Continuing contributions continue to pay for the rea your household or membe include contributions to an  Protection against family	Note: Do not include a lity insurance, and health since, and health savings according total amount? you actually spend? It to the care of household a sonable and necessary care of your immediate family what account of a qualified ABLE of violence. The reasonably manual insurance in the reasonably manual insurance in the reasonably manual insurance.	savings account expensions savings account expensions that are reasonables \$\frac{393.33}{37.40}\$ + \$\frac{632.49}{1,063.22}\$ sor family members. The and support of an elder ho is unable to pay for support of the program. 26 U.S.C. § 5 necessary monthly expensions account of the same support of the pay for support of th	copy total here=>  me actual monthly expenses that you will rly, chronically ill, or disabled member of such expenses. These expenses may	\$\$	,

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ebtor 1	Alona Chervina Keys		Case number (if kn	own)	24-034	172-5-	DMV	V
	Additional home energy costs. Your hom line 8.	e energy costs are included in your insura	ince and operat	ting exp	enses	on		
	If you believe that you have home energy on the fill in the excess amount of home ended.		costs included i	n exper	nses or	line		
	You must give your case trustee document amount claimed is reasonable and necessa		ist show that th	e additi	onal		\$	0.00
	Education expenses for dependent child \$189.58* per child) that you pay for your depublic elementary or secondary school.					or		
	You must give your case trustee document claimed is reasonable and necessary and r		ıst explain why	the amo	ount			
	* Subject to adjustment on 4/01/25, and ev	ery 3 years after that for cases begun on o	r after the date	of adjus	stment.		\$	420.00
	Additional food and clothing expense. Thigher than the combined food and clothing than 5% of the food and clothing allowance	allowances in the IRS National Standards						
	To find a chart showing the maximum addiinstructions for this form. This chart may als			eparate	9			
	You must show that the additional amount	claimed is reasonable and necessary.					\$	86.00
	Continuing charitable contributions. The instruments to a religious or charitable organizations.		e in the form of	cash o	r financ	cial		
	Do not include any amount more than 15%	of your gross monthly income.				-	\$_	100.0
	Add all of the additional expense deduc Add lines 25 through 31.	ions.					\$	1,819.22
Dedu	ictions for Debt Payment							
lo	or debts that are secured by an interest bans, and other secured debt, fill in lines o calculate the total average monthly paym	33a through 33e.			e			
С	reditor in the 60 months after you file for ba	nkruptcy. Then divide by 60.						
	Mortgages on your home						veraç ayme	ge monthly nt
33a.	Copy line 9b here				=	:> \$	•	1,650.01
	Loans on your first two vehicles							
33b.	Copy line 13b here				=	:> \$	;	236.44
33c.					=	:> \$		0.00
33d						,		
oou.	List other secured debts: e of each creditor for other secured debt	Identify property that secures the debt		Does princlude or insu	taxes			
				□ N				
	-NONE-			□ Y	es	\$		
						Ψ		
				Пи	0			
				□ Y	es	\$		
				□ м	0			
				_	es +	- \$		
					4.	opy otal		
33e	Total average monthly payment. Add lines	33a through 33d	\$ 1	,886.4	<b>5</b>	ere=>	\$	1,886.45

Alona Chervina Keys 24-03472-5-DMW Debtor 1 Case number (if known) 34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? ☐ No. Go to line 35. Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the cure amount). Next, divide by 60 and fill in the information below. Name of the creditor Identify property that secures the debt Total cure amount Monthly cure amount 5148 Holly Ridge Farm Rd Raleigh, NC 27616 Wake County **27,652.89** ÷ 60 = \$ **Shellpoint Mortgage Servicing** Valued at Zillow value 460.88 ÷60 = \$  $\div 60 = +$ \$ Copy total 460.88 460.88 Total here=> \$ 35. Do you owe any priority claims - such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507. □ No. Go to line 36. Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims 6,000.00 100.00 36. Projected monthly Chapter 13 plan payment 2,377.20 Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by 8.00 the Executive Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. Copy total 190.18 190.18 Average monthly administrative expense here=> 2,637.51 37. Add all of the deductions for debt payment. Add lines 33e through 36. **Total Deductions from Income** 38. Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS 6,762.02 expense allowances Copy line 32, All of the additional expense deductions 1,819.22 Copy line 37, All of the deductions for debt payment 2,637.51 11.218.75 11.218.75 Total deductions..... \$ Copy total here=>

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Alona Chervina Keys 24-03472-5-DMW Debtor 1 Case number (if known) Part 2: Determine Your Disposable Income Under 11 U.S.C. § 1325(b)(2) 39. Copy your total current monthly income from line 14 of Form 122C-1. Chapter 13 11,778.39 Statement of Your Current Monthly Income and Calculation of Commitment Period. 40. Fill in any reasonably necessary income you receive for support for dependent children. The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably 0.00 necessary to be expended for such child. 41. Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as 669.51 specified in 11 U.S.C. § 362(b)(19). 42. Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here => 11,218.75 43. Deduction for special circumstances. If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses. Describe the special circumstances Amount of expense \$ Сору 0.00 0.00 Total \$ here=> \$ Сору 44. **Total adjustments.** Add lines 40 through 43. here=> -\$ 11.888.26 -109.87 45. Calculate your monthly disposable income under § 1325(b)(2). Subtract line 44 from line 39. Part 3: Change in Income or Expenses 46. Change in income or expenses. If the income in Form 122C-1 or the expenses you reported in this form have changed or are virtually certain to change after the date you filed your bankruptcy petition and during the time your case will be open, fill in the information below. For example, if the wages reported increased after you filed your petition, check 122C-1 in the first column, enter line 2 in the second column, explain why the wages increased, fill in when the increase occurred, and fill in the amount of the increase. Form Increase or I ine Reason for change Date of change Amount of change decrease? ☐ Increase ☐ 122C-1 ☐ 122C-2 ☐ Decrease ☐ 122C-1 ☐ Increase ☐ 122C-2 ☐ Decrease ■ 122C-1 ☐ Increase ☐ 122C-2 ☐ Decrease ☐ 122C-1 ☐ Increase ☐ 122C-2 ☐ Decrease

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Debtor 1 Alona Chervina Keys Case number (if known) 24-03472-5-DMW

Part 4:	Sign Below	
	By signing here, under penalty of perjury you declare that the information on this statement and in any attachments is true and correct.  /s/ Alona Chervina Keys Alona Chervina Keys Signature of Debtor 1	
Date	November 3, 2024  MM / DD / YYYY	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7	<b>7</b> :	Liquidation	
\$2	245	filing fee	
Ş	\$78	administrative fee	
+ 5	\$15	trustee surcharge	
\$:	338	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses">http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses</a>.

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/services-forms/bankruptcy/cre">http://www.uscourts.gov/services-forms/bankruptcy/cre</a> dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. B2030 (Form 2030) (12/15)

### **United States Bankruptcy Court Eastern District of North Carolina**

In r	e Alona Chervina Keys		Case No.	24-03472-5-DMW
		Debtor(s)	Chapter	13
	DISCLOSURE OF COMP	ENSATION OF ATTORNE	Y FOR DE	CBTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 compensation paid to me within one year before the fibe rendered on behalf of the debtor(s) in contemplation	iling of the petition in bankruptcy, or agr	reed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	6,500.00
	Prior to the filing of this statement I have receive	ed	\$	500.00
	Balance Due		\$	6,000.00
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed con	mpensation with any other person unless	they are mem	pers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compe copy of the agreement, together with a list of the i			
5.	In return for the above-disclosed fee, I have agreed to	render legal service for all aspects of th	e bankruptcy c	ase, including:
	<ul> <li>a. Analysis of the debtor's financial situation, and rer</li> <li>b. Preparation and filing of any petition, schedules, s</li> <li>c. Representation of the debtor at the meeting of cred</li> <li>d. [Other provisions as needed]</li> <li>Negotiations with secured creditors to reaffirmation agreements and applicated 522(f)(2)(A) for avoidance of liens on the secure of the secure</li></ul>	tatement of affairs and plan which may be ditors and confirmation hearing, and any o reduce to market value; exempti- tions as needed; preparation and	be required; adjourned hea on planning;	rings thereof;
6.	By agreement with the debtor(s), the above-disclosed Representation of the debtors in any other adversary proceeding.			es, relief from stay actions or
		CERTIFICATION		
this	I certify that the foregoing is a complete statement of bankruptcy proceeding.	any agreement or arrangement for paym	ent to me for re	epresentation of the debtor(s) in
	November 3, 2024	/s/ Sheree Cameron		
	Date	Sheree Cameron		
		Signature of Attorney  Cameron Law		
		8019 Atamasco Circle		
		Raleigh, NC 27616 919-627-7748 Fax: 860	6-851-2599	
		cameronlaw@gmail.co	om	
		Name of law firm		